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26119 7590 03/09/2006  
**KLARQUIST SPARKMAN LLP**  
121 S.W. SALMON STREET  
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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

Gregory L. Maurer	(Depositor's name)
<i>G. L. Maurer</i>	(Signature)
June 5, 2006	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/607,601	06/27/2003	Mark Ronald Plesko	3382-64707	7614

**TITLE OF INVENTION: EXTENSIBLE TYPE SYSTEM FOR REPRESENTING AND CHECKING CONSISTENCY OF PROGRAM COMPONENTS DURING THE PROCESS OF COMPILE**

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$1700	06/09/2006
EXAMINER	ART UNIT	CLASS-SUBCLASS		06/08/2006 SHASSEN2 00000020 10607601	
CHAVIS, JOHN Q	2193	717-141000	01 FC:1501 02 FC:1504 03 FC:0001	1400.00 OP 300.00 OP 5.00 OP	
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). <input type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. <input type="checkbox"/> "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.					
2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.					
Klarquist Sparkman LLP 2 _____ 3 _____					

**3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)**

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Microsoft Corporation

Redmond, WA

Please check the appropriate assignee category or categories (will not be printed on the patent):  Individual  Corporation or other private group entity  Government

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Issue Fee  
 Publication Fee (No small entity discount permitted)  
 Advance Order - # of Copies 3 (three)

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A check in the amount of the fee(s) is enclosed.  
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 The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 02-4550 *any additional* (enclose an extra copy of this form).

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a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.  b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature G. L. Maurer

Date 6/5/06

Typed or printed name Gregory L. Maurer

Registration No. 43,781

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